



## Mammography Supervisor: Responsibilities and Duties

### PROCEDURE

### MAMMOGRAPHY SUPERVISOR'S QUALITY ASSURANCE REVIEW

#### OBJECTIVE

All mammography facilities must designate a mammography supervisor who is responsible for assuring compliance with Michigan's *Ionizing Radiation Rules*. The objective of this form is to provide the mammography supervisor the guidance necessary to perform and document the required responsibilities.

The mammography supervisor is responsible for compliance with the *Ionizing Radiation Rules* as they pertain to mammography. A primary requirement is that there be a written agreement, or contract, between the mammography supervisor and the facility. This agreement needs to state that the mammography supervisor is responsible for assuring compliance with the *Ionizing Radiation Rules* and that the mammography supervisor has the authority to make changes in the mammography program necessary to achieve compliance with the Rules.

In conjunction with this form, we highly recommend that the mammography supervisor be familiar with all sections of the American College of Radiology's (ACR) *Mammography Quality Control Manual*.

#### FREQUENCY

The mammography supervisor shall be available by telephone or in person for consultation with any mammography machine operator. When serious problems arise or are found, the mammography supervisor may become involved on a **daily** basis until corrections are made.

The mammography supervisor's evaluations of the mammography technologists' performance shall be done **semi-annually**.

The mammography supervisor's review of the quality assurance program shall be done **annually**.

### PROCEDURE STEPS

The primary responsibilities of the mammography supervisor are outlined in the *Ionizing Radiation Rules*, Part 14, Rule 618.

Satisfactory completion of the required mammography supervisor responsibilities needs to be verified directly by the mammography supervisor. The mammography supervisor should follow the steps described below and then complete forms *Mammography Machine Operator Performance Evaluation* (BHS/HFS-889) and



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*Mammography Quality Assurance Check List* to help assure that all responsibilities have been met.

### **Semiannual evaluation of technologists' performance**

Evaluate the technologist's performance by direct observation of a standard mammography procedure performed on at least one patient. An acceptable form, *Mammography Machine Operator Performance Evaluation* (BHS/HFS-889), is attached.

Discuss the results with the technologist within ten days of the observation. Give a copy of the evaluation form to the technologist. Keep these forms on file for at least seven years.

### **Annual review of the quality assurance procedures manual**

1. The mammography supervisor is responsible for establishing and maintaining the quality control program. The mammography supervisor should carefully and critically review the quality control program and its effectiveness as follows:
  - Assure that procedures for all quality control tests required by the ACR or the state are included in the quality assurance procedures manual. The procedure for each test must include the frequency of the test, the forms to be used to record the results, limits of acceptability, and a protocol for making corrections when the test result falls outside of the limits of acceptability.

Facilities are encouraged to use the ACR's *Mammography Quality Control Manual* for quality control procedures. However, if the facility uses the ACR quality control manual, a statement should be included in the quality assurance procedures manual indicating that the facility will follow the procedures, frequencies, forms, and limits of acceptability in that manual. The facility may revise portions of the ACR manual if necessary. If the ACR manual does not outline appropriate steps to follow to make corrections when a test falls outside of acceptable limits, the facility should revise the ACR manual to include such steps.

- Determine if the established limits of acceptability are appropriate for the facility's quality assurance goals. Revise if necessary.



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- Assure that records of QC tests for the last 12 months are included in the quality assurance procedures manual.
  - Assure that the last physicist's report is in the quality assurance procedures manual. Confirm that any problems found by the physicist have been corrected or properly addressed. From the physicist's report, confirm that the mean glandular dose for an average patient is less than 200 millirads for a screen-film system with a grid.
  - Look for trends or significant problem areas which may need to be addressed. Consult with the medical director as appropriate.
2. Assure that credentials for all of the interpreting physicians, the mammography technologists, and the medical physicist are in the quality assurance procedures manual and are up to date.
- Credentials for the interpreting physicians shall include:
    - A. a copy of the physician's license to practice medicine in Michigan
    - B. either a copy of the physician's certification in diagnostic radiology or radiology
  - OR--
  - documentation that the physician has completed a residency program in radiology along with documentation of three months formal training in reading mammograms. This alternative to being certified is only good for two years after completion of the residency program
  - C. documentation of the number of CMEs earned in the last three years.
  - D. number of mammographic examinations interpreted in the last year for each physician
  - E. annual records for each physician of outcome data for correlation of positive mammograms to biopsies done and the number of cancers detected.



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- Credentials for the mammography technologists shall include:
    - A. a copy of their registry certificate
    - B. either a copy of the advanced certificate in mammography
    - OR--
    - documentation of successful completion of a formal program of mammography instruction that meets the requirements of Rule 625
    - C. documentation of the number of CEUs earned in the last three years
    - D. number of mammography examinations performed in the last two years for each technologist
    - E. semi-annual evaluations for each technologist.
  - Credentials for the medical physicist shall include:
    - A. a copy of the current State of Michigan *Approval as a Mammography Medical Physicist* certificate stating that the physicist is qualified to do mammography consultations in Michigan
    - B. documentation of the number of CEUs earned in the last three years
    - C. the number of mammography surveys conducted in the last two years.
3. Assure that the facility's quality assurance procedures manual contains the elements recommended by the ACR and listed on the attachment labeled *Recommendations for a Mammography Quality Assurance Procedures Manual* (BHS/HFS-887).
  4. Assure that the mammography equipment is properly registered and authorized by the Michigan Department of Community Health and accredited by the American College of Radiology. Assure that the facility is certified by the Food and Drug Administration.
  5. Review the personnel radiation monitoring records and assure that each individual maintains his or her radiation exposure below the regulatory limit of 1250 millirems per quarter.



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### Mammography Quality Assurance Check List

#### Mammography Supervisor's Annual Review of the Quality Assurance Procedures Manual

Item	Yes	No	Comment
1. <i>Quality Control Program</i> Does each QC test include:			
Frequency of the test			
Forms to record results			
Limits of acceptability			
Corrective action protocol			
Are established limits of acceptability appropriate?			
Are QC test results for the last 12 months included?			
Is the physicist's report included? Have all problems been corrected or properly addressed? Is the mean glandular dose for an average patient less than 200 millirads (for screen-film with grid)?			
2. <i>Personnel Credentials</i> Do the credentials for each of the interpreting physicians include:			
physician's license			
certification or training			
CMEs			
number of mammographies read			
outcome data			
Do the credentials for each of the mammography technologists include:			
registry certificate			
advanced certificate or formal instruction in mammography			
CEUs			
number of exams performed			
semi-annual evaluations			
Do the credentials for the medical physicist include:			
state approval certificate			
CEUs			
number of surveys conducted			
3. Does the manual include all items on form BHS/HFS-887?			
4. Is the facility and all mammography machines:			
registered and authorized by MDCH			
accredited by the ACR			
certified by the FDA			
5. Are the radiation exposures on the personnel monitoring records below regulatory limits?			

The quality assurance procedures manual has been reviewed and was either found to be acceptable or was updated.

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Mammography Supervisor

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Date